

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	SNT		021799
O.I.P.E. CLASSIFIER		43	3/18/99
FORMALITY REVIEW	CG-	691065	2-23-99

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral)... Canceled
 ÷ Restricted

N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Final	Original	Date
1	✓	✓	5/16/99
2	✓	✓	5/17/99
3	✓	✓	5/17/99
4	✓	✓	5/17/99
5	✓	✓	5/17/99
6	✓	✓	5/17/99
7	✓	✓	
8	✓	✓	
9	✓	✓	
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If more than 150 claims or 10 actions
staple additional sheet here

BEST AVAILABLE